

What is stroke?

Stroke is a “brain attack” that occurs when blood, which brings oxygen to your brain, stops flowing and brain cells die. Up to 80 percent of strokes are preventable, but nearly 795,000 people in the United States will have a stroke each year. For all racial groups, stroke is the third leading cause of death in America and a leading cause of adult disability.

How does stroke affect African Americans in the United States?

African Americans are twice as likely to die from stroke as Caucasians. The rate of strokes in African Americans is almost double that of Caucasians. Strokes also occur earlier in life for African Americans than Caucasians. In addition, African American stroke survivors are more likely to become disabled and experience difficulties with daily living and activities.

The statistics are staggering. African Americans are more impacted by stroke than any other racial groups within the American population.

Other facts:

- African American women have a lower 1-year survival following ischemic stroke (caused by a blood clot) compared with Caucasians.
- Among those aged 20 to 44, African Americans are 2.4 times more likely to have a stroke compared with Caucasians.
- African Americans are less likely to receive t-PA, the only FDA-approved treatment for stroke, compared with Caucasians.

Why?

Not all of the reasons are clear why African Americans have an increased risk of stroke. However, risk factors certainly play a major role in the risk of having a stroke.

Risk factors

Stroke risk factors are the things that likely cause strokes. If you have one or more of the following risk factors, it's even more important that you learn about the lifestyle and medical changes you can make to prevent a stroke.

Controllable Risk Factors:	Uncontrollable Risk Factors:
High blood pressure	Age
Diabetes	Gender
High cholesterol	Race
Atrial fibrillation	Family history
Tobacco use/smoking	Previous stroke or TIA
Alcohol use	
Obesity	
Sickle cell disease	
Sedentary lifestyle	

Controllable risk factors

Many controllable risk factors are either lifestyle or medical risk factors.

Lifestyle risk factors, such as smoking, excessive alcohol use and being overweight, can often be controlled by making lifestyle changes.

Medical risk factors, such as high blood pressure, high cholesterol and atrial fibrillation, can be controlled by surgery or medication. If you have diabetes, it's important to control weight through diet and exercise to reduce the higher risk of stroke that comes with diabetes.

The following stroke prevention guidelines will help you learn how to lower your stroke risk, but remember to talk regularly with your doctor about risk factor management in case medication or other treatment should be altered. It is also important to regularly take medication prescribed by your doctor.

Stroke Prevention Guidelines

Lifestyle risk factors

If you smoke, stop.

- Smoking doubles the risk for stroke. If you stop smoking today, your stroke risk will immediately begin to decrease.

If you drink alcohol, drink in moderation.

- Drinking a glass of wine or beer or one mixed drink each day may lower your risk for stroke, provided there is no medical reason you should avoid alcohol.
- Remember that alcohol is a drug — it can interact with other drugs you are taking, and alcohol is harmful if taken in large doses. If you drink too much, cut back or stop. If you don't drink, don't start.

Include exercise in your daily routine.

- Adults should engage in moderate to intense physical activities for at least 30 minutes five or more days each week (brisk walk, bike ride, etc.).
- Before you start a vigorous exercise program, be sure to check with your doctor.

Eat right!

- Enjoy a lower-sodium (salt), lower-fat diet. Reducing the salt and fat in your diet may lower your blood pressure and risk for stroke.
- Eat a diet that consists of fruits, vegetables cooked without fat, lean meats (chicken and fish), and high-fiber foods such as beans and whole-grain breads.
- Baking, broiling and steaming foods rather than frying will benefit your healthier lifestyle.

Medical risk factors

High blood pressure (HBP) (or hypertension)

- 120/80 BP reading is considered normal. 120-139/80-89 means you are at increased risk for HBP. 140/90 or above is considered HBP.
- Manage HBP with medication, diet and exercise.

Cholesterol

- A total cholesterol level should not exceed 200. You are at moderate risk for stroke with levels between 200-239, and at high risk with levels at or over 240.
- Manage cholesterol with medication, diet and exercise.

Diabetes

- Your doctor can prescribe a nutrition program, lifestyle changes and/or medication to help control your diabetes.

Atrial fibrillation (AF)

- AF is a type of irregular heartbeat. It raises stroke risk because it allows blood pooling in the heart that can lead to clots forming and being carried to the brain, causing a stroke.
- Treatment for AF includes medication or electrical stimulation.

Sickle cell disease

- Sickle cell disease is the most common genetic disorder amongst African Americans.
- Treatments include blood transfusions and regular ultrasound testing and other screenings to monitor blood flow.

Remember to always ask your doctor before making lifestyle or medical changes to manage risk factors for stroke.

What are stroke symptoms?

- Sudden numbness or weakness of face, arm or leg (especially on one side of the body).
- Sudden confusion, trouble speaking or understanding.
- Sudden trouble seeing in one or both eyes.
- Sudden trouble walking, dizziness, loss of balance or coordination.
- Sudden severe headache with no known cause.

Stroke is an emergency!

Call 911 if you see or have any of these symptoms. Treatment can be more effective if given quickly, but you must recognize the common stroke symptoms and get immediate medical attention. Every minute counts!

For more resources and links to specific risk factor education, visit www.stroke.org/AAMER.



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Stroke & African Americans



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